

<p><b>Effective on 12/06/2004.</b> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4618).</i></p> <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2007</h3> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		<p style="text-align: center;"><b>Complete If Known</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Application Number</td><td>10/791,861-Conf. #5251</td></tr> <tr><td>Filing Date</td><td>March 4, 2004</td></tr> <tr><td>First Named Inventor</td><td>Hideonori KOSHIKAWA</td></tr> <tr><td>Examiner Name</td><td>L. K. I. Wyrozelski</td></tr> <tr><td>Art Unit</td><td>1714</td></tr> <tr><td>Attorney Docket No.</td><td>0171-1069P</td></tr> </table>		Application Number	10/791,861-Conf. #5251	Filing Date	March 4, 2004	First Named Inventor	Hideonori KOSHIKAWA	Examiner Name	L. K. I. Wyrozelski	Art Unit	1714	Attorney Docket No.	0171-1069P
Application Number	10/791,861-Conf. #5251														
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First Named Inventor	Hideonori KOSHIKAWA														
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Attorney Docket No.	0171-1069P														
<p><b>TOTAL AMOUNT OF PAYMENT</b> (\$) <b>790.00</b></p>															

  

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u>	
<p>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)</p> <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

  

<b>FEE CALCULATION</b>																	
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>																	
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>												
	<small>Small Entity</small>		<small>Small Entity</small>		<small>Small Entity</small>												
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>										
Utility	300	150	500	250	200	100	_____										
Design	200	100	100	50	130	65	_____										
Plant	200	100	300	150	160	80	_____										
Reissue	300	150	500	250	600	300	_____										
Provisional	200	100	0	0	0	0	_____										
							<b>Small Entity</b>										
							<u>Fee (\$)</u> <u>Fee (\$)</u>										
<b>2. EXCESS CLAIM FEES</b>																	
<u>Fee Description</u>							<u>Fee (\$)</u> <u>Fee (\$)</u>										
Each claim over 20 (including Reissues)							50    25										
Each independent claim over 3 (including Reissues)							200    100										
Multiple dependent claims							360    180										
							<b>Multiple Dependent Claims</b>										
							<u>Fee (\$)</u> <u>Fee Paid (\$)</u>										
<u>Total Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u>																	
10    -20 =    0    x    =    _____																	
HP = highest number of total claims paid for, if greater than 20.																	
<u>Indep. Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u>																	
2    -3 =    0    x    =    _____																	
HP = highest number of independent claims paid for, if greater than 3.																	
<b>3. APPLICATION SIZE FEE</b>																	
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																	
<table style="width: 100%;"> <tr> <td style="text-align: left;"><u>Total Sheets</u></td> <td style="text-align: left;"><u>Extra Sheets</u></td> <td style="text-align: left;"><u>Number of each additional 50 or fraction thereof</u></td> <td style="text-align: left;"><u>Fee (\$)</u></td> <td style="text-align: left;"><u>Fee Paid (\$)</u></td> </tr> <tr> <td>_____ - 100 = _____</td> <td>_____ /50 = _____</td> <td>_____ (round up to a whole number) x _____</td> <td>= _____</td> <td>= _____</td> </tr> </table>								<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	_____ - 100 = _____	_____ /50 = _____	_____ (round up to a whole number) x _____	= _____	= _____
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>													
_____ - 100 = _____	_____ /50 = _____	_____ (round up to a whole number) x _____	= _____	= _____													
<b>4. OTHER FEE(S)</b>																	
Non-English Specification, \$130 fee (no small entity discount)																	
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...    790.00																	
<b>SUBMITTED BY</b>																	
Signature <u>R. M. Murphy Jr.</u>		Registration No. <u>28,977</u> (Attorney/Agent)		Telephone <u>(703) 205-8000</u>													
Name (Print/Type) <u>Gerald M. Murphy, Jr.</u>				Date <u>July 6, 2007</u>													